Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Mair

| Fill in this information to identify your case and this filing: | | | | | | | | |
|---|-------------------------|-------------|-----------|------------------------|---|--|--|--|
| Debtor 1 | Sadiyah | Anna-Kay | Malcolm | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bar | nkruptcy Court for the: | Eastern | District | of Pennsylvania | _ | | | |
| Case number | 23-13679-amc | | | | | | | |

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Describe Eacl | n Residenc | e, Building, Land, or Other Real Estate | You Own or Have an | Interest In | |
|----|----------|---|------------------|---|--|---------------------------------------|--|
| 1. | Do | you own or have any l | egal or equita | able interest in any residence, building, land, or sin | ilar property? | | |
| | ₹ | No. Go to Part 2. | | | | | |
| | | Yes. Where is the prope | erty? | | | | |
| 2. | | | | own for all of your entries from Part 1, including a t number here | | \$0.00 | |
| Pa | rt 2: | Describe Your | Vehicles | | | | |
| _ | wn tha | at someone else drives. , vans, trucks, tractors | If you lease a | nterest in any vehicles, whether they are registered vehicle, also report it on Schedule G: Executory Control vehicles, motorcycles | , | S | |
| | 3.1 | Make: Model: | Nissan Altima | Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only | Do not deduct secured claims or exemptions. It the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Prope | | |
| | | Year: | 2008 | ☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? | |
| | | Approximate mileage: | 183,000 | ☐ Check if this is community property (see | \$0.00 | \$0.00 | |
| | | Other information: | | instructions) | | | |
| | | | | | | | |
| | | | | J | | | |
| 4. | Wate | ercraft, aircraft, motor h | nomes, ATVs | and other recreational vehicles, other vehicles, and | accessories | | |
| | _ | | tors, personal | watercraft, fishing vessels, snowmobiles, motorcycle a | ccessories | | |
| | 2 | | | | | | |
| | ☐ Y | es | | | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 2 of 43

Debtor Malcolm, Sadiyah Anna-Kay Case number (if known) 23-13679-amc

| 5. | | the portion you own for all of your entries from Part 2, including any entries for pages art 2. Write that number here | \$0.00 |
|------|---|--|---|
| Pa | rt 3: Describe You | ur Personal and Household Items | |
| Do y | ou own or have any legal o | r equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | Household goods and fur Examples: Major appliance | nishings es, furniture, linens, china, kitchenware | |
| | ☐ No ☑ Yes. Describe | Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less. | \$900.00 |
| 7. | • | I radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ctronic devices including cell phones, cameras, media players, games | |
| | √ Yes. Describe | Various used televisions, mobile devices, and computers, each valued at \$600 or less. | \$250.00 |
| 8. | | gurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or collections; other collections, memorabilia, collectibles | |
| | ✓ No ☐ Yes. Describe | | |
| 9. | | hobbies raphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and try tools; musical instruments | |
| | Yes. Describe | | |
| 10. | Firearms Examples: Pistols, rifles, s ✓ No | hotguns, ammunition, and related equipment | |
| | Yes. Describe | | |
| 11. | Clothes Examples: Everyday clothe | es, furs, leather coats, designer wear, shoes, accessories | |
| | No | | |
| | ✓ Yes. Describe | Various used articles of clothing, shoes, and accessories, each valued at \$600 or less. | \$200.00 |
| 12. | silver | ry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, | |
| | ✓ No ☐ Yes. Describe | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 3 of 43

Debtor Malcolm, Sadiyah Anna-Kay

| 13. | Non-farm animals | | | | |
|------|--|--|---|-------------------------|---|
| | Examples: Dogs, cats | , birds, horses | | | |
| | √ No | | | | |
| | Yes. Describe | | | | |
| 14. | Any other personal ar | nd household items you did | not already list, including any health aids y | ou did not list | |
| | √ No | | | | |
| | Yes. Give specific information | | | | |
| | iniormation | | | | |
| 15. | | _ | rt 3, including any entries for pages you have | | \$1,350.00 |
| | Torractor write that | | | | |
| Pa | rt 4: Describe | Your Financial Assets | | | |
| Do y | ou own or have any leg | gal or equitable interest in an | y of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash | | | | |
| | Examples: Money you | ı have in your wallet, in your ho | ome, in a safe deposit box, and on hand when | you file your petition | |
| | √ No | | | | |
| | ☐ Yes | | | Cash: | |
| 17. | Deposits of money | | | | |
| | | • | ounts; certificates of deposit; shares in credit u multiple accounts with the same institution, list | | |
| | ☐ No | | | | |
| | √ Yes | | Institution name: | | |
| | | 17.1. Checking account: | Navy Federal Credit Union | | \$60.00 |
| | | 17.2. Checking account: | Police and Fire Federal Credit Union | | \$900.00 |
| 18. | | or publicly traded stocks s, investment accounts with bro | okerage firms, money market accounts | | |
| 19. | Non-publicly traded s LLC, partnership, and | | prated and unincorporated businesses, incl | uding an interest in an | |
| | ☐ No | | | | |
| | Yes. Give specific | | | | |
| | information about them | Name of entity: | | % of ownership: | |
| | | SeLaH, LLC (defunct - fou | nded in 2020, but never any activity) | 100.00% | \$0.00 |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 4 of 43

Debtor Malcolm, Sadiyah Anna-Kay

| 20. | Government and corporate bonds and other negotiable and non-negotiable instruments | | | | | |
|-----|---|--|--|--|--|--|
| | Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. | | | | | |
| | ☑ No | | | | | |
| | ☐ Yes. Give specific information about them | | | | | |
| 21. | Retirement or pension accounts | | | | | |
| | Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | | | | | |
| | ☑ No | | | | | |
| | Yes. List each account separately. | | | | | |
| 22. | Security deposits and prepayments | | | | | |
| | Your share of all unused deposits you have made so that you may continue service or use from a company | | | | | |
| | Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others | | | | | |
| | ☑ No | | | | | |
| | ☐ Yes | | | | | |
| 23. | Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) | | | | | |
| | ☑ No | | | | | |
| | ☐ Yes | | | | | |
| 24. | Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. | | | | | |
| | 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | | | | | |
| | ☑ No | | | | | |
| | ☐ Yes | | | | | |
| 25. | Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit | | | | | |
| | ☑ No | | | | | |
| | Yes. Give specific information about them | | | | | |
| 26. | Patents, copyrights, trademarks, trade secrets, and other intellectual property | | | | | |
| | Examples: Internet domain names, websites, proceeds from royalties and licensing agreements | | | | | |
| | ☑ No | | | | | |
| | Yes. Give specific information about them | | | | | |
| 27. | Licenses, franchises, and other general intangibles | | | | | |
| | Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses | | | | | |
| | ☑ No | | | | | |
| | Yes. Give specific information about them | | | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 5 of 43

Debtor Malcolm, Sadiyah Anna-Kay

| Mone | y or property owed to you? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|------|--|---|
| 28. | Tax refunds owed to you | |
| | ✓ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years | |
| 29. | Family support | |
| | Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement | |
| | ☑ No | |
| | Yes. Give specific information | |
| 30. | Other amounts someone owes you | |
| | Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else | |
| | ☑ No | |
| | Yes. Give specific information | |
| 31. | Interests in insurance policies | |
| | Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance | |
| | ☑ No | |
| | Yes. Name the insurance company of each policy and list its value | |
| 32. | Any interest in property that is due you from someone who has died | |
| | If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. | |
| | ☑ No | |
| | Yes. Give specific information | |
| 33. | Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment | |
| | Examples: Accidents, employment disputes, insurance claims, or rights to sue | |
| | ☑ No | |
| | Yes. Describe each claim | |
| 34. | Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims | |
| | ☑ No | |
| | Yes. Describe each claim | |
| 35. | Any financial assets you did not already list | |
| | ☑ No | |
| | ☐ Yes. Give specific information | |
| 36. | Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here | \$960.00 |
| Pai | t 5: Describe Any Business-Related Property You Own or Have an Interest In. List any re | al estate in Part 1. |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 6 of 43

Debtor Malcolm, Sadiyah Anna-Kay

| 37. | Do you own or have any legal or equitable interest in any business-related property? | |
|-----|---|--------------|
| | ☑ No. Go to Part 6. | |
| | ☐ Yes. Go to line 38. | |
| 45. | Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here | \$0.00 |
| Pa | rt 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Inflyou own or have an interest in farmland, list it in Part 1. | nterest In. |
| 46. | Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? | |
| | ☑ No. Go to Part 7. | |
| | ☐ Yes. Go to line 47. | |
| 52. | Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here | \$0.00 |
| Pa | rt 7: Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| 53. | Do you have other property of any kind you did not already list? | |
| | Examples: Season tickets, country club membership | |
| | ✓ No | |
| | Yes. Give specific information | |
| 54. | Add the dollar value of all of your entries from Part 7. Write that number here | \$0.00 |
| Pa | rt 8: List the Totals of Each Part of this Form | |
| 55. | Part 1: Total real estate, line 2 | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 \$0.00 | |
| 57. | Part 3: Total personal and household items, line 15 \$1,350.00 | |
| 58. | Part 4: Total financial assets, line 36 \$960.00 | |
| 59. | Part 5: Total business-related property, line 45 \$0.00 | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 \$0.00 | |
| 61. | Part 7: Total other property not listed, line 54 + \$0.00 | |
| 62. | Total personal property. Add lines 56 through 61 | + \$2,310.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62. | \$2,310.00 |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 7 of 43

| Fill in this information | n to identify your case | : | |
|--------------------------|-------------------------|-------------|-------------------------------|
| Debtor 1 | Sadiyah | Anna-Kay | Malcolm |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bank | ruptcy Court for the: | Eas | tern District of Pennsylvania |
| Case number | 23-13679-aı | mc | |
| (if known) | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as | Exempt | | | | | |
|---|---|--|--|--|--|--|
| Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. 1. □ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☑ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | |
| Brief description: 2008 Nissan Altima Line from Schedule A/B: 3.1 | \$0.00 | \$0.00 100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5) | | | |
| Brief description: Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less. Line from Schedule A/B:6 | \$900.00 | \$900.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 8 of 43 Debtor 1 Case number (if known) 23-13679-amc Sadiyah Anna-Kay Malcolm First Name Middle Name Last Name Part 2: Additional Page 3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) **√** No ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No

Yes

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 9 of 43

| | | | | 5 | | |
|---------------------------|---|-------------|--------------------------------------|--------------|--|------------------------------------|
| Debtor 1 | Sadiyah | Anna-Kay | Malcolm | | Case numb | er (if known) 23-13679-amc |
| | First Name | Middle Name | Last Name | | | |
| Part 2: Add | litional Page | | | | | |
| • | ion of the property a | | Current value of the portion you own | Amount | of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Check or | lly one box for each exemption. | |
| Brief descripti | on: | | | √ i | Ф250 00 | 11 U.S.C. § 522(d)(3) |
| | televisions, mobile of ach valued at \$600 of | | \$250.00 | 100% | \$250.00 6 of fair market value, up y applicable statutory limit | 11 0.3.0. § 322(0)(3) |
| Line from Schedule A/B | : <u>7</u> | | | to an | y applicable statutory infinit | |
| Brief descripti | on: | | #000.00 | \checkmark | \$200.00 | 11 U.S.C. § 522(d)(3) |

☐ 100% of fair market value, up

☐ 100% of fair market value, up

100% of fair market value, up

to any applicable statutory limit

\$60.00

to any applicable statutory limit

\$900.00

to any applicable statutory limit

11 U.S.C. § 522(d)(5)

11 U.S.C. § 522(d)(5)

\$200.00

\$60.00

\$900.00

Various used articles of clothing, shoes, and

11

17___

Police and Fire Federal Credit Union

17

accessories, each valued at \$600 or less.

Line from Schedule A/B:

Line from

Line from Schedule A/B:

Brief description:

Checking account

Schedule A/B:
Brief description:

Checking account

Navy Federal Credit Union

Entered 01/05/24 13:55:42 Desc Main Case 23-13679-amc Doc 16 Filed 01/05/24 Document Page 10 of 43

| Fill in this information to identify your case: | | | | | | | | |
|---|-------------------------|-------------|--------------------------|--|---------------------|--|--|--|
| Debtor 1 | Sadiyah | Anna-Kay | Malcolm | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States B | ankruptcy Court for the | : Eastern | District of Pennsylvania | | | | | |
| Case number (in known) | f 23-13679-amc | | | | Check if this is an | | | |
| <u> </u> | | | | | amended filing | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - 🗹 No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

| | Yes. Fill in all of the information below. | | | | | | | |
|-----|---|---|---|---|-----------------------------------|--|--|--|
| P | art 1: List All Secured Claims | | | | | | | |
| 2. | separately for each claim. If more than one | nore than one secured claim, list the creditor creditor has a particular claim, list the other st the claims in alphabetical order according to the | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | | | |
| 2.1 | <u> </u> | Describe the property that secures the claim: | | | | | | |
| | Creditor's Name | | | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | | |
| | City State ZIP Code Who owes the debt? Check one. | ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. | | | | | | |
| | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | □ An agreement you made (such as mortgage or □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) | ′ | | | | | |
| | Check if this claim relates to a community debt | | | | | | | |
| | Date debt was incurred | Last 4 digits of account number | _ | | | | | |
| | Add the dollar value of your entries in | Column A on this page. Write that number here: | \$0.00 | | | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 11 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc
First Name Middle Name Last Name

| Part 1: | Additional Page After listing any entries on thi followed by 2.4, and so forth. | s page, number them beginning with 2.3, | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
|----------|---|---|---|---|-----------------------------------|
| 2.2 | | Describe the property that secures the claim: | | | |
| Creditor | 's Name | | \neg | | |
| Number | Street | As of the date you file, the claim is: Check all that Contingent | t apply. | | |
| City | State ZIP Code | ☐ Unliquidated☐ Disputed | | | |
| Who ov | ves the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Deb | tor 1 only tor 2 only tor 1 and Debtor 2 only | □ An agreement you made (such as mortgage or such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit | secured car loan) | | |
| | east one of the debtors and | Other (including a right to offset) | | | |
| | ck if this claim relates to a imunity debt | | | | |
| Date de | bt was incurred | Last 4 digits of account number | · | | |
| Add the | dollar value of your entries in (| Column A on this page. Write that number here: | \$0.00 | | |
| | s the last page of your form, add aat number here: | the dollar value totals from all pages. | \$0.00 | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main

Document Page 12 of 43

| Fill in this information to identify your case: | | | | | | | |
|---|--------------------------|-------------|--------------------------|------------------------------------|--|--|--|
| Debtor 1 | Sadiyah | Anna-Kay | Malcolm | | | | |
| ı | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Sankruptcy Court for the | e:Eastern | District of Pennsylvania | | | | |
| Case number (if known) | 23-13679-amc | | | Check if this is an amended filing | | | |

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B:* Property (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property.* If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

| P | art 1: List All of Your PRIORIT | Y Unsecured Claims | | | | |
|----|--|---|-------------------------------------|-----------------|--------------------|--|
| 1. | Do any creditors have priority unsect ✓ No. Go to Part 2. ☐ Yes. | ured claims against you? | | | | |
| 2. | claim listed, identify what type of claim i amounts. As much as possible, list the fill out the Continuation Page of Part 1. | ims. If a creditor has more than one priority unsecured claim, list the tis. If a claim has both priority and nonpriority amounts, list that claim claims in alphabetical order according to the creditor's name. If you had find more than one creditor holds a particular claim, list the other crediton, see the instructions for this form in the instruction booklet.) | n here and show ave more than to | both priority a | and nonpriority | |
| | | | Total claim | Priority amount | Nonpriority amount | |
| 2. | Priority Creditor's Name | Last 4 digits of account number | | | | |
| | - Thomas Creditor's Name | When was the debt incurred? | | | | |
| | Number Street | _ As of the date you file, the claim is: Check all that apply. ☐ Contingent | | | | |
| | City State ZIP Co | | | | | |
| | Who incurred the debt? Check one. | ☐ Disputed | | | | |
| | Debtor 1 only | Type of PRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Domestic support obligations | | | | |
| | Debtor 1 and Debtor 2 onlyAt least one of the debtors and and | ☐ Taxes and certain other debts you owe the government | - 4I | | | |
| | ☐ Check if this claim is for a community debt | ther Claims for death or personal injury while you were intoxica Other. Specify | | | | |
| | Is the claim subject to offset? | | | | | |
| | ☐ No | | | | | |
| | ☐ Yes | | | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 13 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc
First Name Middle Name Last Name

| Pa | rt 2: List All of Your NONPRIORITY Unsecured | d Claims |
|-----|---|--|
| 3. | Do any creditors have nonpriority unsecured claims aga | inst you? |
| | $oldsymbol{\square}$ No. You have nothing to report in this part. Submit this fo $oldsymbol{1}$ Yes | rm to the court with your other schedules. |
| i | nonpriority unsecured claim, list the creditor separately for ea | abetical order of the creditor who holds each claim. If a creditor has more than one ach claim. For each claim listed, identify what type of claim it is. Do not list claims already r claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured |
| | | Total claim |
| 4.1 | Amex | Last 4 digits of account number 1 6 0 3 \$6,787.00 |
| | Nonpriority Creditor's Name | |
| | Correspondence/Bankruptcy | When was the debt incurred? 2/1/2020 |
| | PO Box 981540 | As of the date you file the plain is: Check all that apply |
| | Number Street | As of the date you file, the claim is: Check all that apply. ☐ Contingent |
| | El Paso, TX 79998-1540 | ☐ Unliquidated |
| | City State ZIP Code | ☐ Disputed |
| | Who incurred the debt? Check one. | Type of NONERIORITY uncongred claim: |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: ☐ Student loans |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as |
| | ☐ At least one of the debtors and another | priority claims |
| | ☐ Check if this claim is for a community debt | □ Debts to pension or profit-sharing plans, and other similar debts☑ Other. Specify <u>CreditCard</u> |
| | Is the claim subject to offset? | |
| | ☑ No | |
| | ☐ Yes | |
| 4.2 | Capital One | Last 4 digits of account number 0 6 7 1 \$6,623.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? 12/17/2017 |
| | Attn: Bankruptcy | <u> </u> |
| | PO Box 30285 | As of the date you file, the claim is: Check all that apply. |
| | Number Street | ☐ Contingent |
| | Salt Lake City, UT 84130-0285 City State ZIP Code | ☐ Unliquidated |
| | City State ZIP Code | ☐ Disputed |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: |
| | Debtor 1 only | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as |
| | At least one of the debtors and another | priority claims |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts |
| | • | ☑ Other. Specify <u>CreditCard</u> |
| | Is the claim subject to offset? ☑ No | |
| | ☑ Yes | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 14 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc
First Name Middle Name Last Name

| Part 2: Your NONPRIORITY Unsecured Claims - | - Continuation Page | |
|---|--|-----------------------|
| After listing any entries on this page, number them beginnin | ng with 4.4, followed by 4.5, and so forth. | Total claim |
| Atn: Bankruptcy PO Box 30285 Number Street Salt Lake City, UT 84130-0285 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | Last 4 digits of account number 7 6 6 7 When was the debt incurred? 12/21/2020 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard | \$1,015.00 |
| 4.4 Discover Financial Nonpriority Creditor's Name Attn: Bankruptcy 2500 Lake Cook Rd Number Street Riverwoods, IL 60015-3851 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes | Last 4 digits of account number 4 0 9 8 When was the debt incurred? 6/1/2019 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard | \$12,327.00 report as |

Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Case 23-13679-amc Doc 16 Document Page 15 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc Last Name

Middle Name

First Name

| After its day entries on this page, number them beginning with 44, followed by 4,5, and so forth. All Mayorfdab Mark Beankuptey Mark was the debt incurred? 11/1/2015 11/1/20 | Pa | rt 2: Your NONPRIORITY Unsecured Claims — | Continuation Page | | |
|--|------|---|--|----------------------------------|-------------------------|
| Nonpsority Creditor's Name When was the debt incurred? 11/1/2015 | Afte | listing any entries on this page, number them beginning | g with 4.4, followed by 4.5, and so fo | orth. | Total claim |
| All Bankrupley 911 Duke Boulevard Number Street Mason OH 45040 Who incurred the debt? Check one. 9 Debtor 1 only Debtor 2 only Debtor 2 only Pee 4 Bunkler As of the date you file, the claim is: Check all that apply. Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Pee 4 Bunkler Norphrolik Creditor's Name Ann Bankruptcy Debtor 2 only Debtor 2 only Sass Pirl Dr Number Street Cheek if this claim is for a community debt Cheek if this claim is for a community debt Debtor 1 only Debtor 2 only Debtor 1 only Males to claim subject to offset? Sass Spirl Dr Norphrolik Creditor's Name Cheek if this claim is for a community debt Sted claim subject to offset? Skodent loans Debtor 1 only Debtor 2 only Debtor 3 only Sass Spirl Dr Norphrolik Creditor's Name All Bankruptcy Sass Spirl Dr Number Street Cheek if this claim is for a community debt Centingent Unliquidated Debtor 1 only State ZIP Code Unliquidated Unliquida | 4.5 | Macys/fdsb | Last 4 digits of account number | 4 3 4 0 | \$0.00 |
| Am: Bankruptoy Number Street Mason, OH 45040 City State | | Nonpriority Creditor's Name | When was the debt incurred? | 11/1/2015 | |
| Number Street Mason, OH 45040 City State ZIP Code Uniquidated Uniquida | | Attn: Bankruptcy | when was the dept incurred? | 11/1/2015 | |
| Contingent Contingent Contingent Contingent Contingent Contingent Contingent Contingent Contingent Contingent | | 9111 Duke Boulevard | A | or Observational that are also | |
| Uniquidated Disputed Disput | | Number Street | <u> </u> | s: Check all that apply. | |
| Disputed | | | • | | |
| Who Incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only State Debtor 1 only Debtor 1 only Debtor 1 only State ZiP Code Check Influence Check Influ | | City State ZIP Code | • | | |
| Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 onl | | Who incurred the debt? Check one. | - Diopated | | |
| Debigot 1 and Debtor 2 only priority claims Debigot 1 and Debtor 3 and another Check if this claim is for a community debt Debtor 1 and Debtor 2 only Debtor 3 and other similar debts Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only Debtor 6 and shruptcy Debtor 1 only Pres Nonpriority Creditor's Name Air: Bankruptcy Debtor 1 only Debtor 1 only Debtor 1 only Pres Nonpriority Creditor's Name Debts to pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts Debts 1 pension or profit-sharing plans, and other similar debts De | | ☑ Debtor 1 only | Type of NONPRIORITY unsecured | claim: | |
| At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sha | | ☐ Debtor 2 only | | | |
| At least one of the debtors and another Check iff this claim is for a community debt Is the claim subject to offset? An No Yes Last 4 digits of account number O 1 2 7 | | ☐ Debtor 1 and Debtor 2 only | | ration agreement or divorce tha | t you did not report as |
| Check if this claim is for a community debt Specify ChargeAccount Char | | _ | | g plans, and other similar debts | |
| Is the claim subject to offset? No Yes | | ☐ Check if this claim is for a community debt | _ | - : | |
| Yes No Yes No Yes Substitution Yes Yes Substitution Yes Substitution Yes | | Is the claim subject to offset? | | | |
| Yes | | | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy 6:33 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 4 Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? 4.7 MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 4.7 MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 4.7 MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 4.7 Mother only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 one of the debtors and another Debtor 8 one of the debtors and another Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 one of the debtors and another Debtor 8 one of the debtors and another Debtor 9 only Debtor 9 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 one | | _ | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy 6:33 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 4 Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? 4.7 MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 4.7 MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 4.7 MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 4.7 Mother only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 one of the debtors and another Debtor 8 one of the debtors and another Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 one of the debtors and another Debtor 8 one of the debtors and another Debtor 9 only Debtor 9 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 one | 46 | MOLIELA | Land A. Walter of A. Carrier of A. Carrier | 0 4 0 7 | #00.040.00 |
| Attn: Bankruptey 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 4 Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? 47 MOHELA Nonpriority Creditor's Name Attn: Bankruptey Who incurred the debt? Check one. 47 Moheled Nonpriority Creditor's Name Attn: Bankruptey 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 49 Debtor 1 and Debtor 2 only Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? 40 Nonpriority Creditor's Name Attn: Bankruptey As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt Is the claim subject to offset? 41 MOHELA Nonpriority Creditor's Name Attn: Bankruptey 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 42 Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 the debtors and another Debtor 5 on by State Site Site Site Site Site Site Site Si | | | Last 4 digits of account number | 0 1 2 7 | \$20,910.00 |
| 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only □ Debtor 2 only □ At least one of the debtors and another □ Check iff this claim is for a community debt □ Symbol Attrib Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 and Debtor 2 only □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debtor 1 per spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 3 only Check in the claim is: Check all that apply: □ Contingent □ Check if this claim is for a community debt □ Draw 3 the debt incurred Parameter of divorce that you did not report as pr | | · | When was the debt incurred? | 9/1/2019 | |
| Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. Juliquidated Disputed | | | | | |
| Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ MoHELA Nonpriority Creditor's Name Attn: Bankruptcy Monicurred the debt? Check one. ✓ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 onlopeons and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No | | • | As of the date you file, the claim is | s: Check all that apply. | |
| City State ZIP Code Disjuted Disputed Disp | | | Contingent | | |
| Disputed | | | · | | |
| Signature Sig | | | Disputed | | |
| Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes 4.7 MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts of account number 0 1 2 7 \$20,500.00 When was the debt incurred? 8/1/2020 As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Disputed Type of NoNPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 3 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 3 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 3 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 4 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | | , | Type of NONPRIORITY unsecured | claim | |
| Debtor 1 and Debtor 2 only | | • | | ciaiii. | |
| □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes 4.7 MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No Is the claim subject to offset? ✓ No Is the claim subject to offset? ✓ No Poebtor 1 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No | | • | — | ration agreement or divorce tha | t vou did not report as |
| □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes 4.7 MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No Is the claim subject to offset? | | • | priority claims | - | |
| Is the claim subject to offset? Other. Specify | | | | | |
| MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No | | • | → Other. Specify | | |
| Yes | | • | | | |
| MOHELA Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 Unliquidated Disputed Disputed | | | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 1 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 8/1/2020 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | | Yes | | | |
| Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. 1 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 8/1/2020 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | 4.7 | MOHELA | Last 4 digits of account number | 0 1 2 7 | \$20,500.00 |
| Attn: Bankruptcy 633 Spirit Dr Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify No | | Nonpriority Creditor's Name | When we the debt incomed? | 9/1/2020 | |
| Number Street Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | | Attn: Bankruptcy | when was the debt incurred? | 0/1/2020 | |
| Chesterfield, MO 63005-1243 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | | 633 Spirit Dr | | | |
| City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No | | Number Street | • | s: Check all that apply. | |
| Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No | | · · · · · · · · · · · · · · · · · · · | • | | |
| Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No | | City State ZIP Code | | | |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Other. Specify | | Who incurred the debt? Check one. | ☐ Disputed | | |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Other. Specify | | ☑ Debtor 1 only | Type of NONPRIORITY unsecured | claim: | |
| □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No | | | _ | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No | | ☐ Debtor 1 and Debtor 2 only | | ration agreement or divorce tha | t you did not report as |
| ☐ Check if this claim is for a community debt ☐ Other. Specify Is the claim subject to offset? ☑ No | | At least one of the debtors and another | | g plans, and other similar debts | |
| Is the claim subject to offset? ☑ No | | ☐ Check if this claim is for a community debt | | · · | |
| ☑ No | | Is the claim subject to offset? | · · · | | |
| | | | | | |
| | | | | | |

Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Case 23-13679-amc Doc 16 Document Page 16 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc Last Name

Middle Name

First Name

| Pa | Your NONPRIORITY Unsecured Claims — | Continuation Page | | |
|------|---|--|---------------------------------|--------------------------|
| Afte | r listing any entries on this page, number them beginning | g with 4.4, followed by 4.5, and so fo | orth. | Total claim |
| 4.8 | MOHELA | Last 4 digits of account number | 0 1 2 7 | \$5,341.00 |
| | Nonpriority Creditor's Name | When the debt in some 40 | | |
| | Attn: Bankruptcy | When was the debt incurred? | 1/1/2023 | |
| | 633 Spirit Dr | | | |
| | Number Street | As of the date you file, the claim is | s: Check all that apply. | |
| | Chesterfield, MO 63005-1243 | ☐ Contingent | | |
| | City State ZIP Code | Unliquidated | | |
| | Who incurred the debt? Check one. | ☐ Disputed | | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 2 only | ☑ Student loans | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a sepa | ration agreement or divorce th | at you did not report as |
| | ☐ At least one of the debtors and another | priority claims | · · | · |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharinOther. Specify | • • | s |
| | Is the claim subject to offset? | | | |
| | √ No | | | |
| | Yes | | | |
| 4.9 | MOHELA | Last 4 digits of account number | 0 1 2 7 | \$4,573.00 |
| | Nonpriority Creditor's Name | Last 4 digits of account number | 0 1 2 7 | ψ4,573.00 |
| | Attn: Bankruptcy | When was the debt incurred? | 12/1/2021 | |
| | | | | |
| | 633 Spirit Dr Number Street | As of the date you file, the claim is | s: Check all that apply. | |
| | | ☐ Contingent | | |
| | Chesterfield, MO 63005-1243 City State ZIP Code | ☐ Unliquidated | | |
| | City State ZIF Code | ☐ Disputed | | |
| | Who incurred the debt? Check one. | | | |
| | ☑ Debtor 1 only | Type of NONPRIORITY unsecured | claim: | |
| | ☐ Debtor 2 only | ☑ Student loans | | |
| | ☐ Debtor 1 and Debtor 2 only | Obligations arising out of a sepa priority claims | ration agreement or divorce the | at you did not report as |
| | At least one of the debtors and another | ☐ Debts to pension or profit-sharin | g plans, and other similar debt | S |
| | ☐ Check if this claim is for a community debt | Other. Specify | - · | • |
| | Is the claim subject to offset? | | | |
| | ✓ No | | | |
| | Yes | | | |
| | | | | |
| 4.10 | MOHELA | Last 4 digits of account number | 0 1 2 7 | \$3,606.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | 10/1/2021 | |
| | Attn: Bankruptcy | Trion was the door mountain. | 10/1/2021 | |
| | 633 Spirit Dr | A 5 4b | Ob l II th - t l - | |
| | Number Street | As of the date you file, the claim is | s: Check all that apply. | |
| | Chesterfield, MO 63005-1243 | Contingent | | |
| | City State ZIP Code | ☐ Unliquidated☐ Disputed | | |
| | Who incurred the debt? Check one. | ☐ Disputed | | |
| | ☑ Debtor 1 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 2 only | ☑ Student loans | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a sepa | ration agreement or divorce th | at you did not report as |
| | ☐ At least one of the debtors and another | priority claims | | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharin | • • | S |
| | In the electric explicator (" 40 | Other. Specify | | |
| | Is the claim subject to offset? | | | |
| | ☑ No | | | |
| | ☐ Yes | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 17 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc
First Name Middle Name Last Name

| After list | ting any entries on this page, number them beginninឲ្ | g with 4.4, followed by 4.5, and so forth. | Total claim |
|-------------------|---|--|------------------|
| 4.11 _M | OHELA | Last 4 digits of account number 0 1 2 7 | \$1,568.00 |
| No | npriority Creditor's Name | | |
| At | tn: Bankruptcy | When was the debt incurred? 9/1/2021 | |
| 63 | 33 Spirit Dr | A of the date of the decided to Obe deliberate | |
| Nu | mber Street | As of the date you file, the claim is: Check all that apply. | |
| Ch | nesterfield, MO 63005-1243 | ☐ Contingent ☐ Unliquidated | |
| Cit | y State ZIP Code | ☐ Uniliquidated ☐ Disputed | |
| Wh | no incurred the debt? Check one. | ☐ Disputed | |
| √ 1 | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | ☑ Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you d | id not report as |
| | At least one of the debtors and another | priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | Other. Specify | |
| le 1 | the claim subject to offset? | | |
| | No | | |
| | Yes | | |
| 4 40 | | | |
| | blice & Fire FCU | Last 4 digits of account number 0 4 4 6 | \$1,421.00 |
| | npriority Creditor's Name | When was the debt incurred? 1/1/2017 | |
| At | tn: Bankruptcy | · | |
| _ | 01 Arch Street | As of the date you file, the claim is: Check all that apply. | |
| Nu | mber Street | ☐ Contingent | |
| | niladelphia,, PA 19107 | ☐ Unliquidated | |
| Cit | y State ZIP Code | ☐ Disputed | |
| Wh | no incurred the debt? Check one. | · | |
| $\mathbf{\Delta}$ | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | ☐ Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you d priority claims | id not report as |
| _ | At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | ☑ Other. Specify <u>CreditCard</u> | |
| ls t | the claim subject to offset? | | |
| $\mathbf{\Delta}$ | No | | |
| | Yes | | |
| 4 13 | | Local A Political Control of Cont | #0.00 |
| | npriority Creditor's Name | Last 4 digits of account number 2 3 7 9 | \$0.00 |
| | • | When was the debt incurred? 6/21/2018 | |
| | tn: Bankruptcy | | |
| | 77 Long Ridge Rd | As of the date you file, the claim is: Check all that apply. | |
| | mber Street | ☐ Contingent | |
| <u>St</u> | amford, CT 06902-1247 y State ZIP Code | Unliquidated | |
| City | y State ZIP Code | ☐ Disputed | |
| _ | no incurred the debt? Check one. | Time of NONDRIGRITY | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | ☐ Student loans | id not rement |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you d priority claims | iu not report as |
| | At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | ☑ Other Specify ChargeAccount | |
| ls t | the claim subject to offset? | | |
| √. | No | | |
| • | | | |

Entered 01/05/24 13:55:42 Case 23-13679-amc Doc 16 Filed 01/05/24 Page 18 of 43 Document

Case number (if known) 23-13679-amc Debtor 1 Sadiyah Anna-Kay Malcolm Last Name

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page Total claim After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Synchrony Bank/Care Credit Last 4 digits of account number 9 4 7 1 \$0.00 Nonpriority Creditor's Name 2/18/2019 When was the debt incurred? Attn: Bankruptcy Po Box 965060 As of the date you file, the claim is: Check all that apply. Number Street Contingent Orlando, FL 32896 Unliquidated ZIP Code City State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only ■ Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt ☑ Other. Specify CreditCard Is the claim subject to offset? **☑** No ☐ Yes 4.15 Synchrony Bank/Care Credit Last 4 digits of account number \$0.00 6 6 9 Nonpriority Creditor's Name 2/18/2019 When was the debt incurred? Attn: Bankruptcy Po Box 965060 As of the date you file, the claim is: Check all that apply. Number Street Contingent Orlando, FL 32896 Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only ☐ Student loans ■ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ■ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify CreditCard Is the claim subject to offset? **☑** No ☐ Yes 4.16 Synchrony Bank/Care Credit \$0.00 Last 4 digits of account number 0 1 7 Nonpriority Creditor's Name When was the debt incurred? 2/18/2019 Attn: Bankruptcy Po Box 965060 As of the date you file, the claim is: Check all that apply. Number Street Contingent Orlando, FL 32896 Unliquidated City State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt ☑ Other. Specify CreditCard Is the claim subject to offset? **☑** No ☐ Yes

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 19 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc
First Name Middle Name Last Name

| er listing any e – | ntries on this page, number them beginni | ng with 4.4, followed by 4.5, and so forth. | Total claim |
|-----------------------|--|--|----------------------|
| University of | Michigan CU | Last 4 digits of account number 0 6 0 4 | \$11,784.0 |
| Nonpriority C | reditor's Name | When was the debt incurred? 12/1/2018 | |
| Attn: Bankru | ptcy | When was the debt incurred? 12/1/2018 | |
| PO Box 785 | 0 | - Acceptable data on the description of the descrip | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| Ann Arbor, N | /II 48107-7850 | ☐ Contingent | |
| City | State ZIP Code | ─ | |
| Who incurre | d the debt? Check one. | | |
| ✓ Debtor 1 | only | Type of NONPRIORITY unsecured claim: | |
| Debtor 2 | only | ☐ Student loans | |
| Debtor 1 | and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you | ou did not report as |
| At least o | ne of the debtors and another | priority claims | |
| ☐ Check if | this claim is for a community debt | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify <u>CreditCard</u> | |
| Is the claim | subject to offset? | | |
| √ No | | | |
| Yes | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 20 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc First Name Middle Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Weltman Weinberg & Reis Co. LPA On which entry in Part 1 or Part 2 did you list the original creditor? Name ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.4 of (Check one): 170 S Independence Mall W Ste 874w ☑ Part 2: Creditors with Nonpriority Unsecured Claims Number Street Last 4 digits of account number Philadelphia, PA 19106-3334 City ZIP Code State

Filed 01/05/24 Case 23-13679-amc Doc 16 Entered 01/05/24 13:55:42 Desc Main Page 21 of 43 Document

Case number (if known) 23-13679-amc Debtor 1 Sadiyah Anna-Kay Malcolm Last Name

Middle Name

Total. Add lines 6f through 6i.

First Name

Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. **Total claim Total claims Domestic support obligations** 6a. 6a. \$0.00 from Part 1 6b. Taxes and certain other debts you owe the government \$0.00 6b. 6c. Claims for death or personal injury while you were \$0.00 6c. intoxicated Other. Add all other priority unsecured claims. \$0.00 6d. 6d. Write that amount here. Total. Add lines 6a through 6d. 6e. \$0.00 **Total claim Total claims** 6f. Student loans 6f. \$56,498.00 from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 6g. divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other \$0.00 6h. 6h. similar debts 6i. Other. Add all other nonpriority unsecured claims. 6i. \$39,957.00 Write that amount here.

6j.

\$96,455.00

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 22 of 43

| Fill in this information | n to identify your cas | e: | | |
|--------------------------|------------------------|-------------|--------------------------|-------|
| Debtor 1 | Sadiyah | Anna-Kay | Malcolm | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bank | ruptcy Court for the: | Eas | ern District of Pennsylv | vania |
| Case number | 23-13679- | amc | | |
| (if known) | | _ | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or o | company with whom you ha | ve the contract or lease | State what the contract or lease is for |
|-----|-------------|--------------------------|--------------------------|---|
| 2.1 | | | | |
| | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |
| 2.2 | | | | |
| | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |
| 2.3 | | | | |
| | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |
| 2.4 | | | | |
| | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 23 of 43

| Fill in this information to identify your case: | | | | | | | |
|---|--------------------------|-------------|--------------------------|---|---------------------|--|--|
| Debtor 1 | Sadiyah | Anna-Kay | Malcolm | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the | e: Eastern | District of Pennsylvania | | | | |
| Case number | 23-13679-amc | | | | Check if this is an | | |
| (if known) | | | | _ | amended filing | | |

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| Know | n). Answ | er every question | on. | | | | |
|------|--------------------------|---------------------|--|--------------------|-----------------------|-----------|---|
| 1. | Do you ☑ No ☐ Yes | • | btors? (If you are filing | a joint case, do ı | not list either spous | se as a c | odebtor.) |
| 2. | Californ | nia, Idaho, Louisia | , have you lived in a c ana, Nevada, New Mexi | | | | ommunity property states and territories include Arizona, /isconsin.) |
| | | Go to line 3. | | | | | |
| | ☐ Yes | . Did your spouse | e, former spouse, or leg | al equivalent live | e with you at the tin | ne? | |
| | | | | | | | |
| | | Yes. In which cor | mmunity state or territor | y did you live? _ | | | Fill in the name and current address of that person. |
| | | Name of your sp | oouse, former spouse, c | r legal equivaler | nt | | |
| | | Number | Street | | | | |
| | | City | State | | ZIP Code | | |
| 3. | 2 again | as a codebtor | only if that person is a | guarantor or c | osigner. Make sur | e you h | our spouse is filing with you. List the person shown in line ave listed the creditor on <i>Schedule D</i> (Official Form 106D), <i>ule D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2. |
| | Column | 1: Your codebte | or | | | | Column 2: The creditor to whom you owe the debt |
| | | | | | | | Check all schedules that apply: |
| 3.1 |] | | | | | | _ |
| | Name | | | | | | ☐ Schedule D, line |
| | | | | | | | ☐ Schedule E/F, line |
| | Numbei | r | Street | | | | ☐ Schedule G, line |
| | City | | State | | ZIP | Code | |
| 3.2 | | | | | | | _ |
| | Name | | | | | | ☐ Schedule D, line |
| | | | | | | | ☐ Schedule E/F, line |
| | Numbei | r | Street | | | | ☐ Schedule G, line |
| | City | | State | | ZIP | Code | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 24 of 43

| Fill in this information to identify your case: Debtor 1 Sadiyah Anna-Kay Malcolm |
|--|
| Debtor 1 Sadiyah Anna-Kay Malcolm |
| |
| First Name Middle Name Last Name |
| Debtor 2 |
| (Spouse, if filing) First Name Middle Name Last Name |
| United States Bankruptcy Court for the: Eastern District of Pennsylvania |
| Case number 23-13679-amc |
| <u> </u> |

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: | Describe | Employment |
|---------|----------|-------------------|
|---------|----------|-------------------|

| , | - : | | | | | | | | |
|----|--|----------------------------------|------------------|------------|----------------------------|----------|------------------------------------|-------------|--------------|
| 1. | Fill in your employment information. | | Debtor 1 | | | | Debtor 2 or non | -filing sp | ouse |
| | If you have more than one job, attach a separate page with | Employment status | Employed | √ N | ot Employed | | □ Employed ☑ Not | : Employe | ed |
| | information about additional employers. | Occupation | Student | | | | | | |
| | Include part time, seasonal, or self-employed work. | Employer's name | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | Number Street | ; | | | Number Street | | |
| | | | | | | | | | |
| | | | City | | State Zip Code | | City | State | Zip Code |
| | | How long employed there? | ? | | | | | _ | |
| Pa | art 2: Give Details About Mor | nthly Income | | | | | | | |
| | Estimate monthly income as of the unless you are separated. | ne date you file this form. If y | ou have nothing | g to r | report for any line, write | e \$0 in | the space. Include y | our non-fi | iling spouse |
| | If you or your non-filing spouse har more space, attach a separate she | | combine the info | orma | tion for all employers f | or that | person on the lines t | pelow. If y | ou need |
| | | | | | For Debtor 1 | | or Debtor 2 or on-filing spouse | | |
| 2. | List monthly gross wages, salary deductions.) If not paid monthly, ca | | | 2. | \$0.00 | _ | \$0.00 | | |
| 3. | Estimate and list monthly overtime | пе рау. | | 3. | + \$0.00 | +_ | \$0.00 | | |
| 4. | Calculate gross income. Add line | 2 + line 3. | | 4. | \$0.00 | | \$0.00 | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 25 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc
First Name Middle Name Last Name

| | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
|-----|--|--------------|---------------|-----------------------------------|
| | Copy line 4 here→ | 4. | \$0.00 | \$0.00 |
| 5. | List all payroll deductions: | | | |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | <u>\$0.00</u> |
| | 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | <u> </u> |
| | 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | <u></u> \$0.00 |
| | 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | \$0.00 |
| | 5e. Insurance | 5e. | \$0.00 | <u>\$0.00</u> |
| | 5f. Domestic support obligations | 5f. | \$0.00 | <u>\$0.00</u> |
| | 5g. Union dues | 5g. | \$0.00 | <u>\$0.00</u> |
| | 5h. Other deductions. Specify: | 5h. + | \$0.00 | +\$0.00 |
| 6. | Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | 6. | \$0.00 | \$0.00 |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | \$0.00 |
| 8. | List all other income regularly received: | •• | \$3,00 | |
| 0. | 8a. Net income from rental property and from operating a business, profession, or farm | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | 8a. | \$0.00 | \$0.00 |
| | monthly net income. | | <u> </u> | |
| | 8b. Interest and dividends | 8b. | \$0.00 | <u>\$0.00</u> |
| | 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$0.00 | \$0.00 |
| | 8d. Unemployment compensation | 8d. | \$0.00 | <u>\$0.00</u> |
| | 8e. Social Security | 8e. | \$0.00 | <u>\$0.00</u> |
| | 8f. Other government assistance that you regularly receive | | | |
| | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | |
| | Specify: | 8f. | \$0.00 | <u>\$0.00</u> |
| | 8g. Pension or retirement income | 8g. | \$0.00 | \$0.00 |
| | 8h. Other monthly income. Specify: See additional page | 8h. + | \$3,938.66 | + \$0.00 |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$3,938.66 | \$0.00 |
| 10. | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse | 10. | \$3,938.66 | + \$0.00 = \$3,938.66 |
| 11 | State all other regular contributions to the expenses that you list in Sched | ∟ dule J. | | |
| | Include contributions from an unmarried partner, members of your househol friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a | d, your dep | • | |
| | Specify: | | | 11. + \$0.00 |
| 12. | Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics | | | 12. <u>\$3,938.66</u> Combined |
| 13. | Do you expect an increase or decrease within the year after you file this fo | orm? | | monthly income |
| | √ No. | | | |
| | Yes. Explain: | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 26 of 43

| Debtor 1 | <u>Sadiyah</u> | Anna-Kay | Malcolm | Case number (if known) 23-13679-amc |
|--------------------|----------------------|-------------|-----------|-------------------------------------|
| | First Name | Middle Name | Last Name | |
| | | | | Amount |
| 8h. Other n | nonthly income For I | Debtor 1 | | |
| Univers | sity Stipend | | | \$3,247.50 |
| 2022 Ta | ax Return | | | \$691.16 |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 27 of 43

| | | • | Jocament | 1 age 27 of 40 | |
|---------------------------|---------------------------|-------------------------|----------------------|---|---|
| Fill in this information | n to identify your cas | se: | | | |
| Debtor 1 Debtor 2 | Sadiyah First Name | Anna-Kay Middle Name | Malcolm Last Name | Check if this is: | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | A supplement showing postpetition chapter 13 expenses as of the following date: | |
| United States Bank | kruptcy Court for the: | Eas | tern District of Pe | sylvania | |
| Case number (if known) | 23-13679- | amc | | MM / DD / YYYY | |
| Official Form | n 106J | | | | |
| Schedule | J: Your Ex | penses | | 12/1 | 5 |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Your Househol | d | | | |
|----|---|--|--|-----------------|------------------------------------|
| 1. | Is this a joint case? | | | | |
| | ☑No. Go to line 2. | | | | |
| | Yes. Does Debtor 2 live in a sep | parate household? | | | |
| | No | Official Form 106J-2, Expenses for | r Sanarata Hayaahald of Dahtar 2 | | |
| 2. | Do you have dependents? | | Separate Household of Debtor 2. | | |
| ۷. | Do not list Debtor 1 and Debtor 2. | ☐ No ☑ Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Depender age | nt's Does dependent live with you? |
| | Do not state the dependents' | ioi eacii dependent | Child | 1 | □ _{No.} ☑ _{Yes.} |
| | names. | | | | □ No. □ Yes. |
| | | | | | |
| | | | | | —— No. ☐ Yes. |
| | | | | | —— No. ☐ Yes. |
| | | | | | —— No. ☐ Yes. |
| 3. | Do your expenses include | √ No | | | |
| | expenses of people other than yourself and your dependents? | □ _{Yes} | | | |
| | | | | | |
| Pa | rt 2: Estimate Your Ongoing | Monthly Expenses | | | |
| | | | e using this form as a supplement in a neck the box at the top of the form an | - | |
| | clude expenses paid for with non-ca ch assistance and have included it o | | | | Your expenses |
| 4. | The rental or home ownership exp for the ground or lot. | enses for your residence. Include | first mortgage payments and any rent | 4. | \$1,100.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | | 4a. | \$0.00 |
| | 4b. Property, homeowner's, or rente | er's insurance | | 4b. | \$0.00 |
| | 4c. Home maintenance, repair, and | upkeep expenses | | 4c. | \$0.00 |
| | 4d. Homeowner's association or co | ndominium dues | | 4d. | \$0.00 |
| | | | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 28 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc
First Name Middle Name Last Name

| | Y | our expenses |
|---|---------------|-----------------|
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| S. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. — | \$200.00 |
| 6b. Water, sewer, garbage collection | 6b | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. <u> </u> | \$300.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| Food and housekeeping supplies | 7 | \$950.00 |
| Childcare and children's education costs | 8 | \$50.00 |
| Clothing, laundry, and dry cleaning | 9 | \$200.00 |
| 0. Personal care products and services | 10 | \$150.00 |
| Medical and dental expenses | 11 | \$175.00 |
| Transportation. Include gas, maintenance, bus or train fare.Do not include car payments. | 12. | \$350.00 |
| 3. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$200.00 |
| 4. Charitable contributions and religious donations | 14. | \$0.00 |
| Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. — | \$0.00 |
| 15b. Health insurance | 15b. <u> </u> | \$0.00 |
| 15c. Vehicle insurance | 15c. <u> </u> | \$200.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$0.00 |
| 7. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a. <u> </u> | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d. | \$0.00 |
| 8. Your payments of alimony, maintenance, and support that you did not report as deducted | | |
| from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18 | \$0.00 |
| 9. Other payments you make to support others who do not live with you. | 40 | * ** *** |
| Specify: | 19. <u> </u> | \$0.00 |
| O. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | e. | |
| 20a. Mortgages on other property | 20a. <u> </u> | \$0.00 |
| 20b. Real estate taxes | 20b. <u> </u> | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses | _ | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20e. | \$0.00 |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 29 of 43

| Debtor 1 | | Sadiyah | Anna-Kay | Malcolm | Case number (if know | Case number (if known) 23-13679-amc | | | |
|----------|-----------------|---------------------------|---------------------------|--|----------------------|-------------------------------------|--|--|--|
| | | First Name | Middle Name | Last Name | | | | | |
| 21. | Other. Spe | cify: | | | 21. + | \$0.00 | | | |
| 22. | Calculate y | our monthly exp | enses. | | | | | | |
| | 22a. Add lii | nes 4 through 21. | | | 22a | \$3,875.00 | | | |
| | 22b. Copy | line 22 (monthly e | expenses for Debtor 2), i | f any, from Official Form 106J-2 | 22b | \$0.00 | | | |
| | 22c. Add lir | ne 22a and 22b. T | The result is your monthl | y expenses. | 22c | \$3,875.00 | | | |
| 23. | Calculate y | our monthly net | income. | | | | | | |
| | _ | _ | bined monthly income) f | rom Schedule I. | 23a | \$3,938.66 | | | |
| | 23b. Copy | your monthly exp | enses from line 22c abo | ve. | 23b. _ | \$3,875.00 | | | |
| | 23c. Subtra | act your monthly e | expenses from your mon | thly income. | | | | | |
| | The re | esult is your <i>mont</i> | hly net income. | | 23c | \$63.66 | | | |
| 24. | Do you exp | pect an increase | or decrease in your exp | enses within the year after you f | ile this form? | | | | |
| | | | | car loan within the year or do you of a modification to the terms of y | | | | | |
| | ☑ No. ☐ Yes. | None | | | | | | | |

Document Page 30 of 43

| Fill in this information to identify your case: | | | | | | | | |
|---|------------|-------------|------------------------------|----------|--|--|--|--|
| Debtor 1 | Sadiyah | Anna-Kay | Malcolm | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the: | | East | tern District of Pennsylvani | <u>a</u> | | | | |
| Case number 23-13679-ar (if known) | | mc | | | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

| of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your originate new Summary and check the box at the top of this page. | al forms, you must fill out a |
|---|-----------------------------------|
| Part 1: Summarize Your Assets | |
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) | #0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$2,310.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$2,310.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$96,455.00 |
| Your total liabilities | \$96,455.00 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$3,938.66 |
| 5. Schedule J: Your Expenses (Official Form 106J) | |
| Copy your monthly expenses from line 22c of Schedule J | \$3,875.00 |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Mair Document Page 31 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc

Last Name

First Name

Middle Name

Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2.314.91 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$56,498.00 9e.Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) 9g. Total. Add lines 9a through 9f. \$56,498.00

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 32 of 43

| Fill in this information | to identify your case: | | | |
|--------------------------|------------------------|-------------|-------------------------------|--|
| Debtor 1 | Sadiyah | Anna-Kay | Malcolm | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankr | ruptcy Court for the: | East | tern District of Pennsylvania | |
| Case number (if known) | 23-13679-ar | mc | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|--|---|
| | |
| Did you pay or agree to pay someone who is NOT an attorney to help yo | u fill out bankruptcy forms? |
| ☑ No | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| Under penalty of perjury, I declare that I have read the summary and sch | edules filed with this declaration and that they are true and correct. |
| | |
| X _/s/ Sadiyah Anna-Kay Malcolm | |
| Sadiyah Anna-Kay Malcolm, Debtor 1 | |
| Date <u>01/05/2024</u> MM/ DD/ YYYY | |
| | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 33 of 43

| Fill in this information | n to identify your case | | | |
|---------------------------|-------------------------|-------------|----------------------------|------|
| Debtor 1 | Sadiyah | Anna-Kay | Malcolm | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bank | ruptcy Court for the: | East | tern District of Pennsylva | ania |
| Case number (if known) | 23-13679-aı | mc | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| hat is your current marital status? | | | | |
|---|------------------------------|--------------------|----------------|----------------------------|
| Married | | | | |
| Not married | | | | |
| uring the last 3 years, have you lived anywho | ere other than where you li | ive now? | | |
| No | | | | |
| Yes. List all of the places you lived in the las | t 3 years. Do not include wl | here you live now. | | |
| Debtor 1: | Dates Debtor 1 lived there | Debtor 2: | | Dates Debtor 2 lived there |
| | | ☐ Same as Debtor 1 | | ☐ Same as Debtor 1 |
| 841 Bynan Dr Apt 306 | From 2018 | | | From |
| imber Street | To <u>2021</u> | Number Street | | |
| psilanti, MI 48197-1297 | _ | | | - |
| y State ZIP Code | _ | City | State ZIP Code | _ |
| | | ☐ Same as Debtor 1 | | ☐ Same as Debtor 1 |
| | From | | | From |
| imber Street | To | Number Street | | To |
| ty State ZIP Code | _ | City | State ZIP Code | _ |
| | | | | |
| ithin the last 8 years, did you ever live with a tories include Arizona, California, Idaho, Louis | | | | munity property states and |
| No | | | | |
| Yes. Make sure you fill out Schedule H: You | r Codebtors (Official Form | 106H). | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 34 of 43

Case number (if known) 23-13679-amc

Malcolm

| 1 Did you | - | | | | |
|----------------|--|--|---|---|---|
| Fill in the to | have any income from employmotal amount of income you receive iling a joint case and you have inc | ed from all jobs and all busin | esses, including part-time a | activities. | ears? |
| □ No | ining a joint sadd and you have inc | ome that you receive togeth | or, not it only offed under D | | |
| _ | Fill in the details. | | | | |
| Y res. | riii iii tile details. | | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross Income (before deductions and exclusions) | Sources of income Check all that apply. | Gross Income (before deductions and exclusions) |
| | nuary 1 of current year until the Ifield for bankruptcy: | ✓ Wages, commissions, bonuses, tips | \$25,980 (est.) | ☐ Wages, commissions, bonuses, tips | |
| | | Operating a business | | Operating a business | |
| | calendar year: | ✓ Wages, commissions, bonuses, tips | \$32,950.00 | ☐ Wages, commissions, bonuses, tips | |
| (ourraury | YYYY | Operating a business | | Operating a business | |
| | calendar year before that: | ✓ Wages, commissions, bonuses, tips | \$17,221.00 | ☐ Wages, commissions, bonuses, tips | |
| (January | 1 to December 31, <u>2021</u>) YYYY | Operating a business | | Operating a business | |
| - | t case and you have income that y | you received together, list it o | only once under Debtor 1. | | |
| √ No | | | • | | |
| | | | , | | |
| Yes. | Fill in the details. | | , | | |
| Yes. | Fill in the details. | | · | | |
| | Fill in the details. ist Certain Payments You M | ade Before You Filed fo | | | |
| art 3: L | ist Certain Payments You M | | | | |
| art 3: L | | | | | |
| art 3: L | ist Certain Payments You Mer Debtor 1's or Debtor 2's debts Neither Debtor 1 nor Debtor 2 heroman individual primarily for a pers | primarily consumer debts? nas primarily consumer deb onal, family, or household pu | or Bankruptcy ts. Consumer debts are de urpose." | | s "incurred by |
| art 3: Li | ist Certain Payments You Mer Debtor 1's or Debtor 2's debts of Neither Debtor 1 nor Debtor 2 han individual primarily for a personal During the 90 days before you firm | primarily consumer debts? nas primarily consumer deb onal, family, or household pu | or Bankruptcy ts. Consumer debts are de urpose." | | s "incurred by |
| art 3: L | ist Certain Payments You Mer Debtor 1's or Debtor 2's debts Neither Debtor 1 nor Debtor 2 heroman individual primarily for a pers | primarily consumer debts? nas primarily consumer deb onal, family, or household pu | or Bankruptcy ts. Consumer debts are de urpose." | | s "incurred by |
| art 3: Li | ist Certain Payments You Mer Debtor 1's or Debtor 2's debts or Debtor 2's debts or Debtor 1 nor Debtor 2's an individual primarily for a personaring the 90 days before you find No. Go to line 7. Yes. List below each credit paid that creditor. Do | primarily consumer debts? Tas primarily consumer debts Tas prima | ts. Consumer debts are deurpose." ay any creditor a total of \$7,575* or more in one of mestic support obligations, | | al amount you |
| art 3: Li | ist Certain Payments You Mer Debtor 1's or Debtor 2's debts or Debtor 2's debts or Debtor 1 nor Debtor 2's an individual primarily for a personaring the 90 days before you find No. Go to line 7. Yes. List below each credit paid that creditor. Do | primarily consumer debts? nas primarily consumer debtonal, family, or household pulled for bankruptcy, did you put to whom you paid a total on include payments for do to an attorney for this bankruptcy. | ts. Consumer debts are de prose." Pay any creditor a total of \$7,575* or more in one of mestic support obligations, uptcy case. | 7,575* or more? r more payments and the tot such as child support and ali | al amount you |
| art 3: Li | ist Certain Payments You Mer Debtor 1's or Debtor 2's debts or Debtor 2's debts or Debtor 2 han individual primarily for a personal During the 90 days before you file No. Go to line 7. Yes. List below each credit paid that creditor. Do not include payments * Subject to adjustment on 4/01/ | primarily consumer debts? nas primarily consumer debtonal, family, or household pulled for bankruptcy, did you put to whom you paid a total ont include payments for dor to an attorney for this bankruptcy and every 3 years after the primarily consumer debutes. | ts. Consumer debts are deurpose." or \$7,575* or more in one or mestic support obligations, uptcy case. nat for cases filed on or after ts. | 7,575* or more? If more payments and the tot such as child support and alier the date of adjustment. | al amount you |
| Are either No. | ist Certain Payments You Mer Debtor 1's or Debtor 2's debts Neither Debtor 1 nor Debtor 2 han individual primarily for a pers During the 90 days before you fi No. Go to line 7. Yes. List below each credit paid that creditor. Do not include payments * Subject to adjustment on 4/01/ Debtor 1 or Debtor 2 or both had During the 90 days before you file. | primarily consumer debts? nas primarily consumer debtonal, family, or household pulled for bankruptcy, did you put to whom you paid a total ont include payments for dor to an attorney for this bankruptcy and every 3 years after the primarily consumer debutes. | ts. Consumer debts are deurpose." or \$7,575* or more in one or mestic support obligations, uptcy case. nat for cases filed on or after ts. | 7,575* or more? If more payments and the tot such as child support and alier the date of adjustment. | al amount you |
| art 3: L | ist Certain Payments You Mer Debtor 1's or Debtor 2's debts or Debtor 2's debts or Debtor 2 han individual primarily for a personal During the 90 days before you file No. Go to line 7. Yes. List below each credit paid that creditor. Do not include payments * Subject to adjustment on 4/01/ | primarily consumer debts? nas primarily consumer debtonal, family, or household pulled for bankruptcy, did you put to whom you paid a total ont include payments for dor to an attorney for this bankruptcy and every 3 years after the primarily consumer debutes. | ts. Consumer debts are deurpose." or \$7,575* or more in one or mestic support obligations, uptcy case. nat for cases filed on or after ts. | 7,575* or more? If more payments and the tot such as child support and alier the date of adjustment. | al amount you |

Debtor 1

Sadiyah

Anna-Kay

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 35 of 43 Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc First Name Middle Name Last Name 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. **√**No Yes. List all payments to an insider. 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. **✓** No Yes. List all payments that benefited an insider. **Identify Legal Actions, Repossessions, and Foreclosures** 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Yes. Fill in the details. Status of the case Nature of the case Court or agency Money Loaned Case title Discover v. Debtor Pending Philadelphia Court of Common Pleas Court Name Case number 231100428 On appeal 1400 John F Kennedy Blvd ☐ Concluded Number Street Philadelphia, PA 19107-3200 ZIP Code City 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **☑** No ☐ Yes. Fill in the details. 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a courtappointed receiver, a custodian, or another official? **√** No Yes

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Page 36 of 43 Document Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc First Name Middle Name Last Name Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? **√**No Yes. Fill in the details for each gift. 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **√**No Yes. Fill in the details for each gift or contribution. **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **✓** No Yes. Fill in the details. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Cibik Law, P.C Person Who Was Paid Attorney's Fee and Cost;; \$575.00 11/21/2023 1500 Walnut Street Suite 900 Number Street 11/19/2023 \$900.00 11/15/2023 \$1,000.00 Philadelphia, PA 19102 City State ZIP Code mail@cibiklaw.com Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **√** No Yes. Fill in the details.

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 37 of 43

| Debtor 1 | Sadiyah | Anna-Kay | Malcolm | Case number (if known) 23-13679-amc |
|--------------------------|--|---|----------------------------------|--|
| | First Name | Middle Name | Last Name | |
| ordinary co | ourse of your busing houtright transfers | ess or financial affairs and transfers made as | ? | transfer any property to anyone, other than property transferred in the f a security interest or mortgage on your property). |
| Ø not incit | ude gills and transfe | ers triat you riave airead | ay listed on this statement. | |
| | Fill in the details. | | | |
| | | | did you transfer any property to | o a self-settled trust or similar device of which you are a beneficiary? |
| (These are | often called asset-p | protection devices.) | | |
| ☐ Yes. F | Fill in the details. | | | |
| | | | | |
| Part 8: LI | st Certain Finan | cial Accounts, Ins | truments, Safe Deposit Bo | xes, and Storage Units |
| | | led for bankruptcy, we | re any financial accounts or in | struments held in your name, or for your benefit, closed, sold, moved, |
| | ecking, savings, mor | ney market, or other fin | | leposit; shares in banks, credit unions, brokerage houses, pension |
| √ No | | | | |
| ☐ Yes. F | Fill in the details. | | | |
| 21. Do you valuables? | | ou have within 1 year | before you filed for bankruptcy | , any safe deposit box or other depository for securities, cash, or other |
| √ No | | | | |
| ☐ Yes. F | Fill in the details. | | | |
| 22. Have yo | ou stored property | in a storage unit or pla | nce other than your home within | n 1 year before you filed for bankruptcy? |
| √ No | | | | |
| ☐ Yes. F | Fill in the details. | | | |
| Part 9: Id | entify Property | You Hold or Contro | l for Someone Else | |
| 23 Do you | hold or control any | nroperty that someo | ne else owns? Include any proj | perty you borrowed from, are storing for, or hold in trust for someone. |
| 2 0. 20 }0a | noid of control diff | , property that someon | ic cloc owner. moldae any prop | sorty four sortoned from, are storing to, or flord in a decise someone. |
| | Fill in the details. | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 38 of 43

Debtor 1 Sadiyah Anna-Kay Malcolm Case number (if known) 23-13679-amc
First Name Middle Name Last Name

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

| | Site means any location, facility, or propor utilize it, including disposal sites. | perty as defined under any environmental law, wh | ether you now own, operate, or utilize it or used to own, operate, |
|-----|--|--|--|
| - | Hazardous material means anything an pollutant, contaminant, or similar term. | environmental law defines as a hazardous waste | e, hazardous substance, toxic substance, hazardous material, |
| Rep | port all notices, releases, and proceeding | ngs that you know about, regardless of when the | ey occurred. |
| 24. | Has any governmental unit notified you | u that you may be liable or potentially liable und | er or in violation of an environmental law? |
| 5 | ∕ INo | | |
| | Yes. Fill in the details. | | |
| 25. | Have you notified any governmental ur | nit of any release of hazardous material? | |
| 5 | 1 No | | |
| | Yes. Fill in the details. | | |
| 26. | Have you been a party in any judicial o | r administrative proceeding under any environn | nental law? Include settlements and orders. |
| 5 | 1 No | | |
| | Yes. Fill in the details. | | |
| | | | |
| ar | t 11: Give Details About Your Bu | siness or Connections to Any Business | |
| 27. | Within 4 years before you filed for banl | kruptcy, did you own a business or have any of | the following connections to any business? |
| | ☐ A sole proprietor or self-employed | I in a trade, profession, or other activity, either full | -time or part-time |
| | ☑ A member of a limited liability con | npany (LLC) or limited liability partnership (LLP) | |
| | ☐ A partner in a partnership | | |
| | ☐ An officer, director, or managing € | executive of a corporation | |
| | ☐ An owner of at least 5% of the vot | ting or equity securities of a corporation | |
| | ☐ No. None of the above applies. Go to I | Part 12. | |
| 5 | Yes. Check all that apply above and fil | l in the details below for each business. | |
| ç | SeLaH, LLC | Describe the nature of the business | Employer Identification number |
| | lame | Youth & Programming Services | Do not include Social Security number or ITIN. |
| _ | | | EIN: <u>8 4 - 4 5 9 0 9 2 7</u> |
| N | lumber Street | Name of accountant or bookkeeper | Dates business existed |
| - | | None | |
| _ | ity State 7IP Code | | From <u>2020</u> To <u>2020</u> |
| _ | | | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Page 39 of 43 Document <u>Sadiyah</u> Debtor 1 Anna-Kay Malcolm Case number (if known) 23-13679-amc First Name Middle Name Last Name 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. **√** No ☐ Yes. Fill in the details below. Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X /s/ Sadiyah Anna-Kay Malcolm Signature of Sadiyah Anna-Kay Malcolm, Debtor 1 Date 01/05/2024 Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? **✓**No Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

✓ No

Yes. Name of person _

Attach the Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 40 of 43

| Fill in this information | to identify your case | : | | |
|---------------------------|-----------------------|-------------|------------------------------|--|
| Debtor 1 | _ Sadiyah | Anna-Kay | Malcolm | |
| | First Name | Middle Name | Last Name | <u>. </u> |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankr | uptcy Court for the: | East | tern District of Pennsylvani | a |
| Case number (if known) | 23-13679-aı | nc | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral What do you intend to do with the property that secures Did you claim the property as a debt? Did you claim the property as exempt on Schedule C?

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Page 41 of 43 Document

Debtor 1 Anna-Kay Case number (if known) 23-13679-amc Sadiyah Malcolm First Name Middle Name Last Name

Part 2: List Your Unexpired Personal Property Leases

| inf | or any unexpired personal property lease that you listed in <i>Schedule G: Executory Contracts and Unexpired Leases</i> (Off formation below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has no expired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). | ,, |
|-----|--|----------------------------|
| | Describe your unexpired personal property leases | Will the lease be assumed? |
| | Lessor's name: | □ No |

| Describe your unexpired personal property leases | Will the lease be assumed? |
|--|---|
| Lessor's name: | ☐ No |
| | ☐ Yes |
| Description of leased property: | |
| | |
| Lessor's name: | □ No |
| Description of leased | ☐ Yes |
| property: | |
| Lessor's name: | □ No |
| 20000 0 Hallio. | |
| Description of leased | Yes |
| property: | |
| Lessor's name: | ☐ No |
| | |
| Description of leased property: | |
| proporty. | |
| Lessor's name: | ☐ No |
| Description of leaved | ☐ Yes |
| Description of leased property: | |
| | |
| Lessor's name: | □ No |
| Description of leased | Yes |
| property: | |
| Lessor's name: | □ No |
| | ☐ Yes |
| Description of leased | ies ies |
| property: | |
| | |
| rt 3: Sign Below | |
| | |
| Jnder penalty of perjury, I declare that I have indicated my intention abo | ut any property of my estate that secures a debt and any personal |
| property that is subject to an unexpired lease. | ,,, |
| | |
| /s/ Sadiyah Anna-Kay Malcolm | |
| Signature of Debtor 1 | |
| Data 04/05/2024 | |
| Date 01/05/2024 MM/ DD/ YYYY | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 42 of 43

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Pennsylvania

| In re | 1 | Malcolm, Sadiyah | Anna-Kay | | | | |
|-------|--------------|-----------------------------|---|--------------------------|------------|------------------------|---------------------------|
| | | | | Cas | se No | 23-13679-amc | |
| Debto | or | | | Cha | apter | 7 | |
| | | | DISCLOSURE OF COMPENS | SATION OF ATTO | RNEY | FOR DEBTOR | |
| 1. | con | npensation paid to | C. § 329(a) and Fed. Bankr. P. 2016(b), one within one year before the filing of behalf of the debtor(s) in contemplation | f the petition in bankru | uptcy, or | agreed to be paid to i | me, for services rendered |
| | For | · legal services, I h | nave agreed to accept | | | <u> </u> | \$2,475.00 |
| | Pric | or to the filing of th | nis statement I have received | | | | \$2,475.00 |
| | Bal | ance Due | | | | <u> </u> | \$0.00 |
| 2. | The | e source of the co | mpensation paid to me was: | | | | |
| | \(| Debtor | Other (specify) | | | | |
| 3. | The | e source of compe | ensation to be paid to me is: | | | | |
| | \sqrt | Debtor | Other (specify) | | | | |
| 4. | | I have not agree | d to share the above-disclosed comper | nsation with any other | r person | unless they are mem | bers and associates of my |
| | ☐ law | - | share the above-disclosed compensate agreement, together with a list of the | • | • | | • |
| 5. | In r | eturn for the abov | e-disclosed fee, I have agreed to rende | er legal service for all | aspects | of the bankruptcy cas | se, including: |
| | a. | Analysis of the bankruptcy; | debtor's financial situation, and render | ring advice to the deb | tor in det | ermining whether to f | ile a petition in |
| | b. | Preparation and | d filing of any petition, schedules, stater | ments of affairs and p | olan whicl | n may be required; | |
| | C. | Representation | of the debtor at the meeting of creditor | rs and confirmation he | earing, ar | nd any adjourned hea | rings thereof; |
| 6. | Ву | agreement with th | ne debtor(s), the above-disclosed fee de | oes not include the fo | ollowing s | ervices: | |

Case 23-13679-amc Doc 16 Filed 01/05/24 Entered 01/05/24 13:55:42 Desc Main Document Page 43 of 43

B2030 (Form 2030) (12/15)

Motion to Extend the Stay. Continued Meeting of Creditor Hearings, Addition of Creditor after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$375 per hour per attorney

| | CERTIFICATION | | | | |
|------------|--|--|--|--|--|
| , | ng is a complete statement of any agreement or arrangement for payment to btor(s) in this bankruptcy proceeding. | | | | |
| 01/05/2024 | /s/ Michael A. Cibik | | | | |
| Date | Michael A. Cibik Signature of Attorney | | | | |
| | Bar Number: 23110 | | | | |
| | Cibik Law, P.C. | | | | |
| | 1500 Walnut Street Suite 900 | | | | |
| | Philadelphia, PA 19102 | | | | |
| | Phone: (215) 735-1060 | | | | |
| | Cibik Law, P.C. | | | | |
| | Name of law firm | | | | |